								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO								RD 10766027						
			SMALL TYPE	ENTITY		R	OTHER SMALL	THAN ENTITY						
]] 7	OTAL CLAIM	S ·	9		·		<u> </u>	RATE	FE	Ε		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 385	00 O	R	BASIC FEE	770.Q0	
TOTAL CHARGEABLE CLAIMS			minus 20=		· Ø			X\$ 9=			R	X\$18=		
ĺΝ	DEPENDENT (	<b>—</b> minus 3 =		· φ			X43=	1		R	X86=	:		
M	ULTIPLE DEPE	NDENT CLAIM F	RESENT			<b>\( \sqrt{2} \)</b>		+145=		7	B	+290=	290	
* If the difference in column 1 is less than zero, enter "0" in column 2							. (	TOTAL		-  0	∵l R	TOTAL	0.450	
L	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								L ENTIT	 Y 01	R	OTHER SMALL		
AMENDMENTA	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADC TION FEI	ÁL		RATE	ADDI- TIONAL FEE	
	Total	1:6	Minus	**		<b>=</b> .		X\$ 9=		0	R	X\$18=		
AME	Independent	1. 2	Minus			-		X43=		. 0	R	X86=		
L	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		۱. ا	·+145=		O	اء	+290=		
							L	TOTA			. L	TOTAL		
4-23-64 (Column 1) (Column 2) (Column 3)								VDDIT. FE	E <b>L</b>		``	100M. FEE 1		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST ER USLY.	PRESENT EXTRA		RATE	ADD TION FEE	٩L		RATE	ADDI- TIONAL FEE	
AMENOMENT	Total	. 10	Minus	44		=.		X\$ 9=		OF	۹ ا	X\$18=		
	Independent	• 2	Minus F MULTIPLE DEPENDENT		01.04.04	1=		X43=	1	OF	٦	X86=	•	
ب	FINST PHESE	NIATION OF ME	LIPLEDE	ENDENT	CLAIM		1	+1'45=		OF	, [	+290=		
:							L	TOTAL		OF	L	TOTAL ODIT, FEE		
_														
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	ER JSLY	PRESENT EXTRA		RATE.	ADDI TIONA FEE	L		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		<b>=</b> .		X\$ 9=		OR		X\$1B=		
\$ L	Independent		Minus	***		2	F	X43=	<del>  .                                     </del>	OR		X86=		
1	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (	CLAIM	. 🔾	-	•		٦.				
• 11	The entry in colum	L	+145=	<u> </u>	OR	L	+290=							
(i it	the "Highest Nur the "Highest Nur	nber Previously Pai nber Previously Pai ber Previously Paid	d For <sup>®</sup> IN THIS d For <sup>®</sup> IN THIS	SPACE is I	ess than ess than	20, enter "20." 3, enter "3."		TOTAL ODIT. FEE of in the ap	L	OR box in co		TOTAL DOIT, FEE nn 1,		